

# Neighborhood Improvement Plan Application

**What is the name of your Neighborhood?**

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**Are you registered with the Neighborhood Notification Program? Yes:\_\_\_\_\_ No:\_\_\_\_\_**

*Neighborhoods must be registered to be considered for this program. If you are not registered, please contact Citizen & Neighborhood Resources at 480-312-3111 for information on how to register.*

**What is the age of your neighborhood? \_\_\_\_\_**

*Neighborhoods must be at least 25 years old to be considered for this program.*

**What are the boundaries of your neighborhood?**

*Neighborhoods must be located south of Indian Bend to be considered for this program.*

**North: \_\_\_\_\_ South: \_\_\_\_\_**

**East: \_\_\_\_\_ West: \_\_\_\_\_**

**Neighborhood Composition:**

*Neighborhoods comprised of more than 75% single family residences (SFR) will be given top priority followed by neighborhoods comprised of 51% to 75% SFR. Neighborhoods made up of less than 51% SFR will not be considered for this program.*

**Are there multifamily complexes within your neighborhood boundaries? If so, please include the street addresses: \_\_\_\_\_**

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**Are there commercial properties within your neighborhood boundaries? If so, please include the street addresses: \_\_\_\_\_**

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**Neighborhood Working Group:**

*Applicants must identify a working group of 3 to 7 members to work with the city on this program and identify a primary contact for coordinating information.*

**Primary contact:**

**Name: \_\_\_\_\_**

**Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_**

**Address: \_\_\_\_\_**

**E-mail address: \_\_\_\_\_**

**Additional working group members:**

- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**E-mail address:** \_\_\_\_\_
- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**E-mail address:** \_\_\_\_\_
- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**E-mail address:** \_\_\_\_\_
- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
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**E-mail address:** \_\_\_\_\_
- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**E-mail address:** \_\_\_\_\_
- **Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Alt. Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**E-mail address:** \_\_\_\_\_

**Neighborhood Support and Involvement:**

*Applications will be scored on the level of support received from residents as indicated on the neighborhood survey. In order for staff and the Scottsdale Pride Committee to evaluate this measure, applicants are required to conduct a neighborhood survey (via phone, e-mail, door-to-door, neighborhood meetings, etc.) within their registered neighborhood boundaries. For rental properties, the tenant/resident should be surveyed unless unoccupied. Please answer the following questions and attach the completed survey form.*

**What method did you use to survey the neighborhood?** \_\_\_\_\_

\_\_\_\_\_

**How many homes are within your boundaries?** \_\_\_\_\_

**How many households responded to the survey?** \_\_\_\_\_

**Of those households responding, how many indicated their support?** \_\_\_\_\_

**How many indicated they did not support your application?** \_\_\_\_\_

**How many expressed no opinion?** \_\_\_\_\_

**Neighborhood Partnership:**

*Neighborhoods will be scored on their willingness and ability to maintain a partnership with the city, demonstrated through a commitment to coordinate neighborhood events and neighborhood communication.*

**Please describe activities or events that your neighborhood plans to conduct over the next 12 months; examples include coordination of a neighborhood cleanup or GAIN event, involvement in the neighborhood watch program or participation in an adopt-a-road event.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please describe the methods you will use for internal neighborhood communication; examples include newsletters or flyers, e-mail or phone tree, or neighborhood meetings.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please describe the neighborhood improvements that you would like to see included in a Neighborhood Improvement Plan. Please add additional space/pages as needed.**

**Please describe the benefit this project will provide to the neighborhood and city, including the impact to aesthetics, safety and community identity and pride. If applicable, describe how this project mitigates any existing issue(s). Please add additional space/pages as needed.**

Submitted by:

Date:

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You may access this application on-line at [www.ScottsdaleAZ.gov/reinvestment](http://www.ScottsdaleAZ.gov/reinvestment)

**For more information or assistance in completing the application process, please contact:**

Decima Sever  
Citizen Liaison  
Citizen & Neighborhood Resources  
7447 E. Indian School Rd.  
Scottsdale, AZ 85251  
(480) 312-3111  
(480) 312-2455 fax

## Neighborhood Improvement Plan: Support & Involvement Survey

*Applicants must complete this form as part of the neighborhood survey, which may be conducted via phone, e-mail, door-to-door, neighborhood meetings, etc. After being briefed about the Neighborhood Improvement Plan program, neighborhood residents/tenants should indicate their support level for working with the city to develop a final Neighborhood Improvement Plan. **Residents are not committing to any specific improvement projects at this time, but to exploring opportunities.***

	Address	Name	Support	DO NOT Support	No Opinion
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
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25					

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